



④ Route Schedule for Amusement Rides

2019 Play Date / Itinerary

DIVISION OF INDUSTRY SERVICES
P.O. Box 7302
Madison, Wisconsin 53707-7302
TDD: Contact through Relay
[Division of Industry Services Programs](#)

Complete registration of amusement rides includes submittal of route including specific sites and dates on which the amusement ride will be operated in the state. If the route is incomplete or modified, the department shall be notified **prior** to operation on the adjusted route.

Failure to completely register amusement rides prior to opening to the public will result in late registration fees and possibly red tag.

NOTE: The department has 15 business days to process the registration application and grant a registration or issue a denial.

Ride Operation Business or Owner Name: _____ Date: _____

Dates of Operations Estimated Number of Rides Playing at this Site _____	Location Name	Location Street Address	Location <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town	Location County	Location Zip Code
	Sponsor Name	Sponsor Address	Sponsor City/Zip	Sponsor Phone Number	Sponsor Email
Dates of Operations Estimated Number of Rides Playing at this Site _____	Location Name	Location Street Address	Location <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town	Location County	Location Zip Code
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④ Route Schedule for Amusement Rides (continued)

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Please make copies of this form as needed.